



Return to: TOWN OF WARNER PLANNING BOARD

P.O. Box 265

Warner, New Hampshire 03278-0059

Telephone: (603) 456-2298, ext. 7

Fax: (603) 456-2297

VOLUNTARY MERGER FORM

*****PLEASE TYPE OR PRINT CLEARLY*****

Please note that this application is subject to NH RSA 91-A which affords the public access to this information.

Today's Date: _____

Property Owner(s) Name(s): _____

Address: _____

Telephone Number: _____

Identify the parcels affected by this merger:

Map# _____ Lot# _____ Book# _____ Page# _____

Map# _____ Lot# _____ Book# _____ Page# _____

Map# _____ Lot# _____ Book# _____ Page# _____

I (we) understand that no merged parcels shall thereafter be separately transferred without subdivision approval.

I (we) understand that the Town of Warner Land Use Office will file this notice with the Merrimack County Registry of Deeds and a copy of the same will be forwarded to the assessing officials of Warner, NH.

Signature of Property Owner(s): _____

The application fee is \$60.00. Please make checks payable to the Town of Warner

Plus a recording fee of _____ with a separate check made out to: Merrimack County Registry of Deeds.

For Office Use Only

Date Received: _____ Date Reviewed: _____ Amount Paid: _____

Signature of Planning Board Representative: _____